

BEST AVAILABLE COPY

CLAIMS ONLY						SERIAL NO.		FILING DATE	
						APPLICANT(S)			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1									
2									
3									
4									
5		4							
6									
7	1								
8		1							
9		2							
10		2							
11		1							
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47									
48									
49									
50									
TOTAL IND.	2								
TOTAL DEP.	17								
TOTAL CLAIMS	19								
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									